

Dudley H.A. Wright II, Chair **Kent Appelhans**, Vice Chair

Dr. Carol Cunningham, State Medical Director

TRAUMA COMMITTEE

<u>Committee Meeting Date and Location:</u> Wednesday, January 8, 2020 (10:00 a.m.) at the ODPS Shipley Building, Conference Room 1106, 1970 W. Broad St, Columbus, OH 43223

<u>Committee Members Present:</u> Diane Simon - Chair, Sara Brokaw, Joyce Burt, Herb de la Porte, Dr. Erik Evans, Kathy Haley, Dr. Kent Harshbarger, Dr. Travis Perry, Dr. James Sauto, Dr. Avraham Schlager, and Tammy Wilkes

<u>Committee Members Absent:</u> Dr. Marco Bonta, Dr. Jeff Claridge, Dr. Ryan Harrison, Patty Hightower, Dr. Laurie Johnson, Fran Lauriha, Angela Schetter, Dr. Michael Shannon, Rachel Velasquez, and Dr. Howard Werman

<u>DPS and EMS Staff Members Present:</u> Natalie Haslage, Executive Director Mel House, Eric Mays, Sue Morris, Kris Patalita, Joe Stack, and Deputy Director Rob Wagoner

<u>Liaisons and Public Present:</u> See sign-in sheet on file

Welcome and Introductions

The meeting was called to order at 10:05 a.m. Diane Simon welcomed everyone. Quorum was attained later in the meeting.

Introductions were made. A new committee member, Ms. Sara Brokaw, was asked to provide additional information to the group regarding her background.

Agenda Items

<u>Education – Ohio EMS for Children (EMSC) Pediatric Emergency Care Coordinator (PECC)</u> (<u>Joe Stack)</u>

Ms. Simon introduced Joe Stack and provided a brief overview of what will be presented. Mr. Stack introduced himself to the group. He provided information regarding the EMSC program and the various partnerships with whom they are involved. He described the EMSC's mission and provided some budget information. He went on to define EMSC's performance measures and ongoing projects. Mr. Stack then provided information regarding the PECC and the potential roles of a PECC. He also emphasized the importance of having designated PECCs. He concluded the presentation by mentioning the next steps for the PECC program. Kathy Haley inquired if there is an opportunity for pediatric care coordinators to interface with centers providing pediatric trauma care. Mr. Stack discussed that communication and coordination is a big part of the program. He further advised that

the hospital side of the program is still in its infancy. There was some further discussion regarding the particulars of promoting the program and the training involved.

Audience member Viola Webber from the Ohio Department of Health (ODH) spoke about Pediatric Disaster Preparedness Coalition which is facilitated by Dr. Deanna Dahl-Grove. Ms. Webber described the grant funding Dr. Dahl-Grove received to support the creation of Pediatric Disaster Care Centers of Excellence. Ms. Webber provided some additional information regarding this endeavor. Ms. Haley suggested including representation from the Trauma Committee or the organization she represents, the Ohio Society of Trauma Nurse Leaders (OSTNL). Ms. Webber thanked her for her suggestion.

Ms. Simon asked if there were any other questions or comments. There were none. Ms. Simon mentioned the desire to continue the educational segment of the Trauma Committee meeting and requested suggestions for future presenters. She asked that any suggestions be sent to her or Deputy Director Rob Wagoner.

Current Status of Trauma Administration at the Division of EMS (DEMS)

Mr. Wagoner mentioned the recent promotions and current vacancies for the division. He turned it over to Executive Director Mel House for additional updates. Director House advised that he is retiring. He went on to describe his years of service in public safety. He thanked the DEMS team and the committee for their service and for making his retirement possible.

Dr. Schlager joined the meeting at 10:46 a.m.; quorum was attained at this time.

Ms. Simon thanked Executive Director House for his many years of service.

Approvals and Items Requiring Action

Meeting Minutes

Ms. Simon requested a motion to approve the November 6, 2019 meeting minutes that were previously distributed via email. The minutes were accepted as written.

<u>ACTION:</u> Motion to approve the meeting minutes from November 6, 2019. Dr. James Sauto – First; Dr. Kent Harshbarger – Second. None opposed. None abstained. Motion approved.

System Update

System Status

Trauma Center Status

Several slides were presented regarding the status of all trauma centers in Ohio. Ms. Simon advised that four hospitals (Mercy Health Lorain, Miami Valley Hospital South, University Hospital (UH) Elyria Medical Center, and UH Parma Medical Center) currently have Level III provisional status. Four hospitals (MetroHealth Parma, Kettering Health Network Fort Hamilton Hospital, Upper Valley Medical Center, and Western Reserve Hospital) are seeking Level III provisional status. Kettering Health Greene Memorial Hospital ceased being a Level III trauma center on December 31st.

An additional slide was displayed outlining what each center seeking provisional status is missing before they will be considered provisional. The slide also included sites with a scheduled consultation visit.

Data Submission Status

Sue Morris asked the group to refer to the handout she provided. The report was run on Monday, January 6th. This report lists all facilities from which the DEMS has not received records. Joyce Burt mentioned that Kettering Medical Center sent its records on the evening of January 6th. Ms. Morris advised that after this report was run, she received records for three facilities. Ms. Haley asked what the Trauma Committee's responsibility is regarding those not in compliance. Eric Mays advised that the DEMS began sending compliance letters to the trauma centers that were not in compliance. Since the letters were sent, two of the three have begun reporting on a regular basis. The third center's administrator advised that, due to changes in personnel, they were not aware of the requirement. Letters will be sent out on a more regular basis and to more facilities. The expectation is that as more letters go out, the number of facilities not reporting will trend downward. Ms. Simon asked the DEMS staff to track the reporting trends.

ACTION ITEM: The DEMS staff will track the reporting trends and will provide this information at a future trauma committee meeting.

Member Status

Ms. Simon advised that there are currently three (3) open seats. These vacancies were displayed in a slide. The open seats are for Seat #6, a physical medicine and rehabilitation physician, Seat #18, which is a for a fire chief, the seat from which Chief Dave Freeman recently resigned, and Seat #22, a representative of a non-trauma center hospital. The DEMS staff will continue to seek nominations for all open seats.

Liaison Reports

Legislative Updates

Mr. Wagoner advised that one of the bills moving through the legislature is regarding military family members receiving reciprocity. He discussed the plan of finding accredited programs in Ohio to facilitate this type of certification. He reported that House Bill (HB) 441 was introduced with a focus on training first responders on how to deal with those with dementia, Alzheimer's disease, and the like, considering the increased prevalence of these types of illnesses. He further advised that there is a meeting this afternoon with State Representative Brian Baldridge regarding stroke legislation. Mr. House added that several bills seem to be circulating related to certifying various individuals in the state. He further advised that some of these propositions will work well with certain types of licensing but may be a cause of concern for the DEMS certifications. Mr. House recommended that members of this committee remain mindful of the various bills because the power to effect change lies in the stakeholders, not in State agencies.

State Board of Emergency Medical, Fire and Transportation Services (EMFTS Board) Mr. Wagoner reported that there are six (6) vacant seats on the EMFTS Board awaiting appointments by the Governor. The EMFTS Board and the DEMS continue to collaborate with the Ohio Department of Health (ODH) in identifying medical transportation services willing to transport high-consequence infectious disease patients. This effort will remain ongoing. He

also advised that an agenda is being created for the February retreat, which will be held February 11-13, 2020. The focus of the retreat will primarily be projects identified in the five-year strategic plan. The National Rural EMS and Care Conference will be held April 22-23, 2020 at the Renaissance Columbus Downtown.

State Medical Director

Ms. Simon advised that Dr. Cunningham was unable to attend the meeting because she is attending the annual meeting of the National Association of EMS Physicians in San Diego. Dr. Cunningham is also involved in updating the algorithms for the pediatric guidelines.

Ohio Department of Health (ODH)

Luke Werhan advised that the "Stepping On" training flyer that was provided in the committee's packet was disseminated via various State electronic mailing systems. This training is provided for facilitators at no cost. Mr. Werhan mentioned that the ODH has released a couple of reports since the November meeting. One is relating to suicide deaths, demographics, and trends, and the other report relates to unintentional drug overdoses. Both documents are available on the ODH website. Mr. Werhan described an increase of suicide deaths for all age groups. He also advised that the data shows that overdoses are decreasing for the first time in about 10 years. He acknowledged the frustration of publishing data that is a year old. For instance, the 2018 report is published at the end of 2019. The ODH is working on more rapid surveillance of fatal unintentional drug overdose statistics by working with several coroners' offices around the state to get more timely information.

EMS Workgroup (on hiatus)

Performance Improvement (PI) Workgroup

Anne Moss reported that the group has begun looking at air medical data and will be working to develop specific research areas for which to receive data. She reported that the PI workgroup discussed looking at the effects of opioids on trauma. The plan is to request data from the Ohio State Highway Patrol. A request was made to the ODH for a burden of injury report. It was discovered that there is no current report available. The PI workgroup is planning to collaborate with the ODH for next year's annual report. The workgroup is also looking at vaping injuries and what data can be gathered regarding the same. The Centers for Disease Control and Prevention (CDC) has guidelines on vaping. Though it is often referred to as a lung injury, it cannot be coded as a trauma injury. Ms. Moss also mentioned an effort to reestablish dashboards and described the efforts thus far. The workgroup made recommendations for updated PI plans as well as a request for hospitals to participate in regions. These topics are on today's Trauma Committee agenda.

Trauma Registry Advisory Workgroup (TRAW, formerly known as TRAS)

Joyce Burt reported that the TRAW met after the last Trauma Committee meeting in November. She reminded the group that adjustments had to be made to Ohio's 2020 Data Dictionary after the National Trauma Data Standard (NTDS) revised their data dictionary. She also discussed the current Trauma Acute Care Registry (TACR) quizzes and plans for those in the future. They plan to implement a tutorial and try to make the quizzes a little more interactive. There will be only three meetings in 2020 with the understanding that there could be a fourth meeting, if needed, to complete the data dictionary. The focus for 2020 will be on education.

Rehabilitation Subcommittee (on hiatus)

Epidemiology Intelligence Service (EIS) Evaluation Workgroup (on hiatus)

Human Resources (HR) Ad Hoc Committee (EMFTS Board)

Mr. Wagoner reported that the HR Ad Hoc Committee met on December 16th and had an all-day meeting. Reciprocity and continuing education (CE) are a couple of the main topics on which the HR Ad Hoc Committee is focused. They worked on recommendations to go to the EMFTS Board regarding certification requirements. He briefly discussed the issue of EMS providers completing more than 24 hours of training in one day. There was additional discussion regarding access to timely, quality CE. Dr. Travis Perry commented that, as an instructor, he often teaches small groups when it would be more beneficial to reach a larger audience to facilitate completion of provider CE. There was a brief group discussion regarding the challenges EMS providers face relating to CE. Mr. Wagoner mentioned virtual methods of CE. He advised that the DEMS staff could send a list of CE sites close to Dr. Perry so he might collaborate with them to reach more students. Danielle Rossler, an audience member, mentioned a technique in her region wherein they utilize medical control to disseminate information regarding CE.

ACTION ITEM: The DEMS staff will email a list of continuing education sites near the Dayton area to Dr. Perry.

Scope of Practice (SOP) Ad Hoc Committee (EMFTS Board)

Mr. Wagoner mentioned the process by which the SOP Ad Hoc is reviewing the current Ohio metrics, comparing those with the national model, and identifying the gaps. He advised that the committee is in the process of developing a guide that will assist all EMFTS Board committees with the complicated process of changing or adopting rules. He further described the work being done by the SOP committee.

Trauma Committee Strategic Plan Focus

Resource Assessment/Competent Workforce - Update

Ms. Simon advised that during the presentation at the November meeting, Innovative Emergency Management (IEM) received great feedback by the committee on their project. IEM has asked for an extension, at no cost, to further explore some of the information this committee requested. Ms. Simon expects to receive more information before the March meeting.

System Oversight

Ohio Regional Trauma Organizations Coalition (ORTOC)

Ms. Rossler reported that the ORTOC group continues to work on their ongoing data validation project. They have identified new data points to review. At the last meeting, they determined that since the group represents all regions, it would be beneficial to have each region fill out a form that would identify that region's best practices, current activities, and Stop the Bleed® information as well as identifying areas where they might be struggling and how they are working through it. Ms. Rossler advised that the next meeting will probably be held telephonically and then ad hoc thereafter. Kelly Harrison, another representative of the

ORTOC group, advised that they will be presenting the results of the data validation in April. An abstract for the first phase of the project has been submitted for acceptance at the Trauma Center Association of America (TCAA) conference. They are waiting to hear if it has been accepted.

Old Business

Rules - Update

Mr. Wagoner reported that on January 2nd, the ODPS rules administrator followed up with the Common Sense Initiative (CSI) office regarding the progress of the business impact analysis (BIA) that was filed in November. This BIA dealt with the proposed change to permit a non-emergent ambulance transport of a stable patient who is less than 16 years of age who has a chronic condition requiring tracheostomy and a ventilator provided that the patient's caregiver accompanies the patient during transport. The DEMS is awaiting further information.

Ms. Haley asked about the status of allowing more than one member of an entity seated on the Trauma Committee. Mr. Wagoner advised that he believes the Governor's office is reviewing the structure of various boards across the state before any changes are made. He reiterated how the Dr. Strauss case has been the catalyst for such a review.

EMS Incident Reporting System (EMSIRS) - Update

Eric Mays reported that Phase I of the agency onboarding process began on December 17th. Data is currently being received from four out of the five identified vendors. Mr. Mays advised that the vendors are bringing their agencies onboard in groups. Phase II will begin soon. There was a brief group discussion concerning tracking various overdose data and the benefits thereof. Mr. Wagoner mentioned that if this committee identifies things that need to be changed and/or updated, there are groups and lobbyists out there that can take up the cause. Mr. Wagoner suggested the committee look at some of those things and identify those that would most benefit Ohio's trauma patients. Ms. Haley made a motion to add this topic as a standing item on the agenda. Dr. Sauto seconded the motion. The motion carried. Clarification on the specific motion was received after the meeting and shall be documented as follows: Ms. Haley moved to add a standing agenda item wherein the Trauma Committee will identify barriers and gaps that limit the ability to fully operationalize a coordinated trauma system, ensuring best outcomes for injured people traveling and living in Ohio. This ongoing agenda item will be used to identify legislative needs.

<u>ACTION:</u> Motion to add a standing agenda item wherein the Trauma Committee will identify barriers and gaps that limit the ability to fully operationalize a coordinated trauma system, ensuring best outcomes for injured people traveling and living in Ohio. Ms. Kathy Haley – First; Dr. James Sauto – Second. None opposed. None abstained. Motion approved.

New Strategic Plan (tabled until the final grant results are received)

Rescue Task Force (RTF) Conference

Ms. Patalita reported that during a planning meeting on November 25th, the group proposed having the RTF conference at the end of September or the first week of October of 2020. The venue proposed was the Ohio Department of Transportation auditorium. The target audience will be those in leadership roles for police, fire, and EMS. They intend to include best practices and grant opportunities as agenda topics.

Trauma Training for Continuing Education (CE) Sites No update at this time.

Run Report Requirements for Ohio – Patient Handoff (Update)

Mr. Wagoner advised that a link was created on the EMS home page under "Critical Information" as a resource repository. Additional information regarding patient reports and the handoff process can be submitted to the DEMS for inclusion here provided it is not something that has copyright constraints. A link to the Central Ohio Trauma Systems (COTS) EMS Handoff Project is included as well. He thanked the COTS group for their valuable assistance with this endeavor. The information provided is not intended to dictate specifically what an agency is to use, but to start a conversation between the agency and the receiving facility and ultimately improve patient care and safety. The DEMS staff will disseminate the memorandum that was reviewed and approved by this committee at the last meeting.

ACTION ITEM: The DEMS staff will send the run report memorandum out to the appropriate agencies through the ODPS electronic mailing system.

Ms. Haley asked if there was an opportunity for some type of publication of this information. She mentioned the preliminary data that was previously reviewed. There was some group discussion regarding performance improvement measures and the best route for gathering and evaluating the use of run reports and the like. Ms. Simon asked if there was a way to track the number or visits to these links on the DEMS website. Mr. Wagoner advised that the DEMS staff will investigate that and report back on their findings.

ACTION ITEM: The DEMS staff will investigate whether there is a way to track the number of times visitors click on the run report links. This will be reported on at the March meeting.

Ohio Trauma Triage Training Module (Update)

Ms. Simon reminded the group of the program format change that occurred. She advised that it has since been reformatted and is available for use. No changes to the content were made at this time. There is still a need to improve the content including traumatic brain injuries and burn surge. Mr. Wagoner advised that he and Ms. Simon reviewed the current version of the trauma triage training module and have drafted editions to the same. He stated that eventually he envisions this committee convening a workgroup to review the proposed changes.

Extensions for Reporting (Update)

Mr. Mays advised that two requests for extension were received this month: Aultman Hospital and Summa Health Akron City Hospital.

Request for Burn Data (Revisited)

Ms. Simon reminded the group that this item has been on the agenda for some time now. She mentioned how Shriner's Hospital does not report their data at this time and that it cannot be required. Dr. Perry advised that that might change now that Shriner's Hospital will be moving to Dayton Children's Hospital later in the year. Mr. Mays stated that once the move is complete, he will try to coordinate with them for their data.

New Business

Questions regarding Inclusion Criteria in the Data Dictionary

Ms. Simon mentioned how the National Trauma Data Bank (NTDB) redefined certain things in their dictionary. She reported that requests were received regarding the need for clarification on patient transfers from one acute care hospital to another and how the NTDB does not address freestanding emergency departments (FSEDs) of which Ohio has many. Ms. Harrison reported that she received a clarification email from the NTDB on this topic. The interpretation was that FSEDs are to be considered the same as acute care hospitals. There was some additional group discussion regarding patient transfers and the need for clarification across the board. Ms. Harrison requested that some type of clarification be documented and/or disseminated which confirms that the trauma committee agrees with treating FSEDs the same as acute care hospitals when it comes to capturing data. Ms. Simon agreed that this committee should send something to the hospitals and trauma centers in support of this decision. There was some additional discussion regarding transfers and the impact on data. Ms. Simon suggested that the first step is sending the clarification letters. At some point in the future, some type of survey or data collection will need to be conducted to determine the actual impact.

ACTION ITEM: The Trauma Committee will draft a letter regarding support for treating FSEDs the same as acute care hospitals.

Ms. Simon advised that another significant addition in the inclusion criteria was related to hip fractures. She advised that she has received quite a bit of feedback regarding this change. This change will impact non-trauma centers and increase the numbers for data collection.

Proposed National Bike Helmet Laws

Ms. Simon advised that this topic came from Dr. Sauto. He previously requested a specific article relating to the proposed national bike helmet laws be disseminated to the committee. The article was sent to the committee via email prior to this meeting. Ms. Simon suggested that this could be a research topic since this is the time of year for grant proposals. There was some general group discussion regarding the proposed law and the impact to this committee. Ms. Haley mentioned that this would be a good time to review data in relation to this topic. Ms. Morris advised that she works with the Ohio Brain Injury Advisory Committee (BIAC) and in their biannual report, there are statistics on helmet usage for bicycles. Ms. Simon requested that this information be provided at the next meeting.

ACTION ITEM: The DEMS staff will provide a copy of the Ohio Brain Injury Advisory Committee's biannual report to the Trauma Committee at the March meeting.

There was additional discussion regarding research topics and the submission deadlines. Ms. Simon suggested the committee work on the verbiage for what type of research they would like done and pass it along to the DEMS grants administrator.

Updated PI Plans

Ms. Simon explained that the PI plan for the state is based off what the regions submitted as their PI plans. It has been a couple of years since the regions submitted PI plans and Ms. Simon proposed drafting a letter to be sent to the regions requesting an updated PI plan.

ACTION ITEM: The Trauma Committee will draft a letter to be sent to the regions requesting an updated PI plan.

Hospital Participation in Regions

Ms. Simon explained how this subject arose. She advised that hospitals that are involved in regions are more easily linked to education, PI and other beneficial information. When they are not, it can create gaps in these same areas. There have been efforts in the past to encourage participation in regions across the state. She described the barriers involved in getting participation. Ms. Simon asked for examples of known successes or failures for recruitment in the regions. There was some general discussion regarding regions gaining or losing members, but no specific strategies were provided. There was an indication that some of the smaller facilities do not have the funds to participate. Ms. Moss advised that there was a discussion at the last PI meeting about having the Trauma Committee send a letter to the non-participating hospitals encouraging participation in the regions. Ms. Simon agreed that that should be done.

ACTION ITEM: The Trauma Committee will draft a letter to be sent to the hospitals who are not currently participating in a region to encourage participation.

Trauma Committee Attendance

Ms. Simon asked the committee to refer to two documents that were provided in the meeting packet. The documents depict the 2019 attendance numbers as well as attendance for the last two years. Ms. Simon reminded the group that there is a requirement by law for 60% attendance. She stated that we need to have as many voices at the table for these meetings as possible.

American College of Surgeons (ACS) Trauma System Assessment Report

Ms. Simon reminded the group about the ACS report that was disseminated after the November 6th meeting. She asked if everyone had a chance to review the report and if there were any questions or comments. Dr. D Millar, an audience member, advised that he brought a few copies of report in case anyone wanted to look at it. Ms. Haley requested Dr. Millar give his assessment of the report since he is involved on a national level to revise the standards. Dr. Millar provided information on the trauma system consultation process and the efforts underway to revise it. A very lengthy group discussion ensued. Topics covered included improvements to Ohio's trauma system made since the last assessment, and the benefits and/or detriments of requesting another assessment and what can be accomplished thereafter.

Dr. Harshbarger left the meeting at 12:34 p.m.

There was additional discussion regarding various obstacles that were encountered in the past and how to navigate them. Lack of any authority appears to be a tremendous obstacle.

Dr. Perry left the meeting at 12:54 p.m.

It was determined that the first step would be to reevaluate the state of affairs of the trauma system in Ohio. There was a brief discussion regarding forming a workgroup. Ms. Rossler asked if this committee would like the ORTOC group to review it first. Ms. Simon agreed that having all of the regions involved would be a good approach. There was further discussion regarding a timeline in which to have the analysis completed and recommendations made. Ms. Harrison advised that they would need six (6) to nine (nine) months.

ACTION ITEM: The ORTOC will review the previous ACS assessment and provide an analysis and recommendations in six (6) to nine (9) months.

Open Forum

Mr. Wagoner advised the group that Executive Director Mel House's retirement program would be held on Friday, January 10th beginning at 10 a.m. and invited all to attend.

Recap of Action Items

The DEMS staff will track the reporting trends and will provide this information at a future trauma committee meeting.

The DEMS staff will email a list of continuing education sites near the Dayton area to Dr. Perry. The DEMS staff will send the run report memorandum out to the appropriate agencies through the ODPS electronic mailing system.

The DEMS staff will investigate whether there is a way to track the number of times visitors click on the run report links. An update will be provided at the March meeting.

The Trauma Committee will draft a letter regarding support for treating FSEDs the same as acute care hospitals.

The DEMS staff will provide a copy of the Ohio Brain Injury Advisory Committee's biannual report to the Trauma Committee at the March meeting.

The Trauma Committee will draft a letter to be sent to the regions requesting an updated PI plan.

The Trauma Committee will draft a letter to be sent to the hospitals who are not currently participating in a region to encourage them to participate.

The ORTOC will review the previous ACS assessment and provide an analysis and recommendation in six (6) to nine (9) months.

After the recap of action items was complete, Ms. Burt asked about a topic on the agenda under "Data Submission Status" that was not previously covered. Mr. Mays briefly mentioned that ESO purchased Clinical Data Management[®], Digital Innovation, and Lancet. It remains unknown at this time what impact, if any, these acquisitions will have on data reporting. The DEMS staff has a conference call scheduled on Friday, January 10th to get better clarification. Ms. Harrison advised that there is a town hall meeting scheduled for January 21st at 3:00 and encouraged the DEMS staff to register and call in for that.

There was no further business.

Ms. Kathy Haley moved to adjourn the meeting; Ms. Tammy Wilkes seconded it. The meeting was adjourned at 1:07 p.m.

<u>ACTION:</u> Motion to adjourn the meeting. Ms. Kathy Haley – First; Ms. Tammy Wilkes – Second. None opposed. None abstained. Motion approved.

Next meeting:

The next Trauma Committee meeting is scheduled for March 11, 2020.